Perspectives on dermatoscopy \supset

An atypical mole

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The diagnosis of pigmented lesions is a daily challenge in general practice. Dermatoscopy can provide extra clues, but requires significant expertise. This series will help you hone your skills.

Case presentation

A 34-year-old man had at least 10 atypical benign moles removed over an 18-year period. At the time of consultation he had a 7 mm diameter, irregularly shaped mole of unknown duration on his upper right back (Figure 1). Dermatoscopy showed a patchy pigment network mixed with scattered pigment globules and dots. The network was accentuated in two regions, but the pigment was not coarse and there were no peripheral streams of pigment or blunt pseudopods (Figure 2). Excision biopsy revealed an epidermis with a prominent and irregular rete ridge system. There were nests of melanocytes at the tips of some of the rete ridges, while other rete tips were spared. Nests of uniform melanocytes were also evident in the upper dermis (Figure 3). There was no melanocytic atypia.

Diagnosis

A compound naevus without histological evidence of atypia.

Discussion

The mole's appearance was atypical because of its irregular shape, asymmetrical patchy pigment network and large size. Dermatoscopy was useful in evaluating the mole because it showed that major features for melanoma were absent, such as peripheral streaming of pigmentation (radial streaming), blunt pigmented projections at the border (pseudopods), coarse pigment network and areas of regression. However, melanomas with reduced production of pigment may produce equivocal dermatoscopic findings, and so this mole was removed for final histological evaluation.

Keypoint

Although some moles may clinically have atypical features, the histopathology may reveal no evidence of atypia. The clinical pattern in this case may reflect involutional changes in naevus cell density and melanin production rather than dysplasia. MI



Figure 1. Atypical mole with irregular border and focally accentuated pigmentation at one lateral border.



Figure 2. Dermatoscopy demonstrating an irregular pigment network that is incomplete, patchy and mixed with small globules and scattered pigment dots.

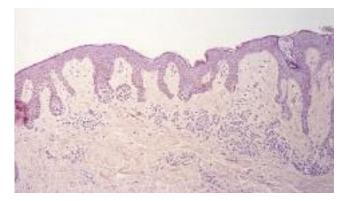


Figure 3. Skin biopsy showing an epidermis with a prominent but irregular rete ridge system. There are focal nests of melanocytes at some of the rete tips and nests of small uniform melanocytes in the upper dermis.

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